

2016 Notice of Intent to Gather Signatures for Candidacy State Candidate

Printed Name (Atrint name exactly as it is to be printed on the official ballot)	
Printed Name (Hrint name exactly as it is to be printed o	n the official ballot)
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Office Office	. 01317627 77
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House Representative, Leg 6288 5. 1575 E. 5. 0 gde A	, 41 87903
-Same-	
Mailing Address	
801-458-812	
Telephone Number	
801-458-8270 Telephone Number Kbmiles 2010@gmail.co	40
Email Address	Twitter Handle (optional)
	, <u>,</u>
Please initial:	
I agree to file all campaign financial disclosure reports an	d I underground that failure to I
possible fines and/or civil or criminal penalties.	a randerstand that famore to do so may result in
I understand that the filing officer will not begin verifying	my petition signatures until I have submitted a
sufficient number of verifiable signatures to meet the signature the	reshold.
I understand that candidate petition packet submissions ar	e verified in the same order as they are received
by the filing officer.	
I have provided a valid email and I understand this will be	used for official communications and updates
from election officials. If no email is available I have provided a	valid physical address.
I understand this form is not a declaration of candidacy an	d I must declare candidacy, in-person, with the
appropriate filing officer during the declaration of candidacy peri	od (March 11, 2016 to March 17, 2016).
Lely STO	Mar. 16 2016
Signature of Candidate	<i>Mor. 16, 2016</i> Date
(a) to (b)	
Captul	Date / Time Submitted
Signature of Filing Officer	Date / Time Submitted